

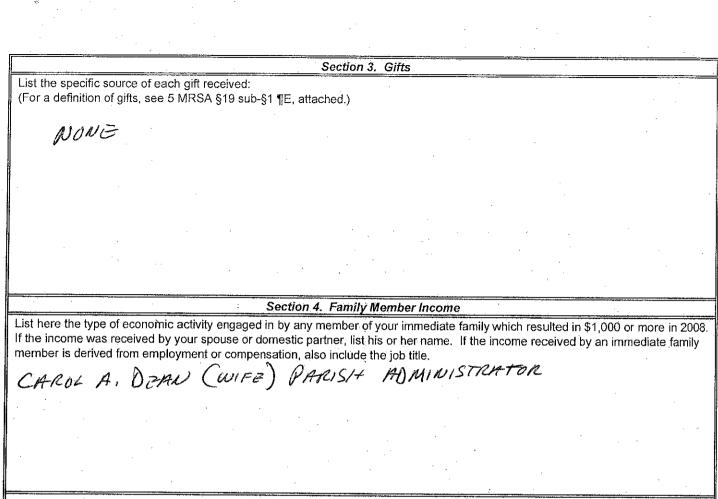
APR 2 9 2009

Financial Disclosure by Executive Employees Calendar Year 2008 MAINEETHICS COMMISSION

Filing Form Covering Calendar Year 2008
Filing Deadline: Thursday, April 30, 2009, 5 p.m.

(Write "N//	A" if a question is not applicable to yo	ou. Use additional sheets	if needed to fully ansv	ver any question.)
	Section	1: Name/Address/Phon	1 e	
Your name:				
JOHN	C. DZAN		•	
	nent/Bureau/Division:	10.1931		
DPS/	FMO			
Your Title:				
STATO	FIRE MARSHAL ailing Address: HOUSE STATUM	:		
Your State Agency M	ailing Address:			
	ME 04333 005	-2 ;		
Your State Agency Pl		* **		
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	the contract of the contract o	atement of sources of in	ncome	
	(as requ	uired by 5 MRSA §19 sub-§2)	to the second se	
corporation, associati check the following bo	on or organization, <u>nor</u> self-employox and skip to question 3.	ed, <u>nor</u> had any other so	ources of income over	r \$1000 from each source,
	2-A. If, during 2008, you were a			
	organization as opposed to being The name of the employing entity:		t the following; if no	t, go to question 2-B:
		•		•
•				
		. ,		
	Its address:			
		•		
•				
	T		•	
	The nature of the business (its prir practice):	ncipal type of economic ac	ctivity; for a law firm, th	ne firm's major areas of
	1		•	

	2-B. If you were self-employed during 2008: (Note: "Self-employed" is defined by 5 MRSA §19 sub-§1 ¶J as an "independent contractor" as defined in 39-A MRSA §102 sub-§13, which says in part: "Independent contractor' means a person who performs services for another under contract, but who is not under the essential control or superintendence of the other person while performing those services." It does not cover interest income and similar non-contracted income, sources for which should be reported under question 2-C below.)		
	The name of your business:		
	The name of your business.		
	·		
	Its address:		
	no address.		
·]			
!	and the control of th		
!	The nature of the business (your principal type of economic activity; for an attorney, your major areas of		
			
	practice):		
	Name each source of income through self-employment that brings either:		
	more than 10% of your gross income whichever is greater, excluding gifts. (To clarify this: if no source contributes more than \$1000, you don't have to report. If you enjoy many large sources over \$1000, you have to report only those that contribute more than 10% to your gross. For a definition of income, see 5 MRSA §19 sub-§1 ¶H, attached; of gifts, 5 MRSA §19 sub-§1 ¶E. If this form of disclosure is prohibited by statute, rule, or an established code of ethics for your profession, specify instead the principal type of economic activity from which sources of income under this paragraph derive.)		
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	2-C. If you had other sources of income over \$1000 each, excluding gifts, list them here. (For a		
	definition of income, see 5 MRSA §19 sub-§1 ¶H, attached; of gifts, 5 MRSA §19 sub-§1 ¶E.)		
	definition of income, see a mixon 313 sub-31 IIII, attached, of gras, a mixon 313 sub-31 III.		
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Section 5. Honoraria

List here the sources of any honoraria (not travel or expenses) accepted for appearances or speeches related to your official duties. (For a definition of honorarium, see 5 MRSA §19 sub-§1 ¶F, attached. Note that this involves honoraria in any amount, not just amounts over \$1000.)

NONCE

Section 6. Compensated work on behalf of executive branch agencies

Aside from your official salary, list here each executive agency before which you or an immediate family member has represented or assisted others in return for compensation of any amount:

NONE

NONE				
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·				
List here the name(s) of your creditors for an	Section 8. Reportable liabilities v reportable liabilities (unsecured loans) of \$3000 or more received from a person not a			
List here the name(s) of your creditors for any reportable liabilities (unsecured loans) of \$3000 or more received from a person not a relative. This does not include credit card liabilities, most educational loans, campaign contributions otherwise recorded by law, or business loans from most financial institutions. (For a definition of reportable liabilities, see 5 MRSA §19 sub-§1 ¶I-1, attached; of relatives, same, ¶I.)				
NONG	en de la composition della com			
Oath or Affirmation (Notarization)				
"Do you solemnly swear (affirm) that the contents of this report are known to your and that the matters and things therein set forth are true (so help you God)?" Signature of Executive Employee:				
Date:	116/09			
Subscribed and sworn (affirmed) to before me this 16 day of april , 200 9.				
Signa	ture of Maine Notary Public: Adthy - and Chambellan Notary Public, State of Maine			
	My commission expires (date)			
	i wy commission expires (date)			
Seal (optional)				

Section 7. Sales to executive branch agencies

List here each executive branch agency to which you or your immediate family members sold goods or services with a value in

excess of \$1000:

Return to:

Cyndi Phillips, Commission Assistant Commission on Governmental Ethics and Election Practices 135 State House Station, Augusta, ME 04333-0135